## PART B - FEE(S) TRANSMITTAL

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26694 VENABLE LI P.O. BOX 3438 WASHINGTON	LP	0/2007 OVF	- 4	Cer	rtificate	of Mailing or Transi	
•	•	1	45/				(Depositor's name)
		WATH.	ADMAN				(Signature)
			L	·		<del></del>	(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTO	OR	ATTOR	NEY DOCKET NO.	CONFIRMATION NO.
10/666,547	09/22/2003		John H. Sahl III		36507-193186		5549
TITLE OF INVENTION	F-1		·				
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	E PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$0		\$1000	04/10/2007
EXAM	EXAMINER		CLASS-SUBCLASS			•	
HOLLINGTON, JERMELE M 2829		2829	324-754000				
1. Change of corresponde CFR 1.363).	ence address or indicatio	n of "Fee Address" (37	2. For printing on the				
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,				
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or t	·····			
PLEASE NOTE: Uni recordation as set fort	less an assignee is ident h in 37 CFR 3.11. Comp	ified below, no assignee pletion of this form is NO	data will appear on the T a substitute for filing a	patent. If an assign n assignment.	6. 12.84e 6. 52.01	ntified belgy. the do	cument has been filed for
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Columbia T	Technologies	s, LLC	Halethorpe	e, Marylan	d, U	JSA	
Please check the appropri	iate assignee category or	categories (will not be pr	rinted on the patent):	Individual 💹 Co	orporation	n or other private grou	p entity Government
4a. The following fee(s) a	are submitted:	41	Payment of Fee(s): (PI	pasa first raanniy ar	v pravia	ously poid issue for al	hanna akana)
Issue Fee		.,	D. Payment of Fee(s): (PI  A check is enclosed	case mist reapply an	iy previo	ousty paid issue lee si	iown above)
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Advance Order - # of Copies			The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 22-0261 (enclose an extra copy of this form).				
5. Change in Entity Stat	tus (from status indicated	l above)			- 44	UZUI (chelose all	oxua copy of this form).
a. Applicant claims	s SMALL ENTITY statu	s. See 37 CFR 1.27.	☐ b. Applicant is no lo	nger claiming SMAI	L ENTI	TY status. See 37 CFI	R 1.27(g)(2).
NOTE: The Issue Fee and nterest as shown by the re	Publication Fee (if requeecords of the United State	uired) will not be accepted	from anyone other than	the applicant; a regis	stered att	orney or agent; or the	assignee or other party in

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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PTO/SB/17 (07-06)
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Effective on 12/08/2004.	Complete if Known			
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).	Application Number	10/666,547-Conf. #5549		
FEE TRANSMITTAL	Filing Date	September 22, 2003		
	First Named Inventor	John H. Sohl, III J. M. Hollington		
For FY 2006	Examiner Name			
X Applicant claims small entity status. See 37 CFR 1.27	Art Unit	2829		
TOTAL AMOUNT OF PAYMENT (\$) 1,000.00	Attomey Docket No.	36507-193186		

	· Victorial	METHOD OF	PAYME	NT (check all the	nat apply)		78% X.	
Check Credit C	Card M	Ioney Order	None	Other (	please identi	fy):		
X Deposit Account Depo	sit Account Numb	er: 22-0261	Deposit Accoun	t Name:		Venable LLI	•	
For the above-ident	ified deposit a	ccount, the D	irector is he	reby authorize	d to: (checl	k all that apply)		
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1848 1980 1994			EE CALC	ULATION				144 - 1 (F)
1. BASIC FILING, SEARCH	I, AND EXAM	INATION FE	ES					
		G FEES	SEAR	CH FEES	EXAMIN	ATION FEES		
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees P	aid (\$)
Utility	300	150	500	250	200	100		<del></del>
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0		
2. EXCESS CLAIM FEES								Small Entity
Fee Description Each claim over 20 (includ	ing Reissues)						Fee (\$) 50	Fee (\$)
Each independent claim over							200	100
Multiple dependent claims	•	,					360	180
Total Claims Extra	Claims F	ee (\$)	Fee Pai	d (\$)	Mu	ltiple Depende	nt Claims	
34 - 55 = HP = highest number of total clai	xims paid for, if gr	eater than 20.					ee Paid (\$	1
		ee (\$)	Fee Paid	d (\$)				_
9 - 12 =	x							
HP = highest number of indepen	dent claims paid	for, if greater tha	n 3.					_
3. APPLICATION SIZE FEE If the specification and dra listings under 37 CFR sheets or fraction there	awings exceed 1.52(e)), the a	pplication siz	e fee due is	\$250 (\$125 fo	onically file or small en	ed sequence or other	computer Iditional 50	)
<u>Total Sheets</u> <u>E</u> :	ktra Sheets	Number		tional 50 or frac			Fee F	Paid (\$)
4. OTHER FEE(S)				·	·		Fees	Paid (\$)
Other (e.g., late filing su	rcharge): 25 15	01 Utility is 04 Publicat	sue fee ion fee fo	r early, volui	ntary, or r	normal		0.00 0.00
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Signature	awysell	Registration No. (Attorney/Agent)	56,784	Telephone	(703) 760-1676
Name (Print/Type)	Caroline J. Swindell			Date	April 10, 2007